

POST-CONVICTION NOTIFICATION REQUEST FORM

INSTRUCTIONS

The following material contains information about Post-Conviction Victims' Rights. It is important that you read this information carefully and if you decide that you want to exercise your rights, that you fill out and sending the necessary paperwork (which is attached) as soon as possible. This paperwork will entitle you to certain types of notification now that the defendant in your case has been sentenced. It is being provided to you as part of your earlier assertion of your rights as a victim of a crime.

Post-Conviction Notification entitles you to receive notice and disposition of the following:

- All post-conviction review and appellate proceedings,
- All post-conviction release proceedings,
- All probation modification proceedings that would impact you,
- All probation revocation or termination proceedings,
- All releases and escapes.

Please complete Section B of the attached Post-Conviction Notification Request form if you want to receive the above described notifications. If you have a designated lawful representative, they should fill out section B and sign their name.

The request for the notice of release and/or escape only needs to be filled out and sent to the Santa Cruz County Sheriff's Office if the defendant has been sentenced to serve a jail term. If no jail time was imposed, then you only need to send your request for notification to the Nogales City Prosecutor's Office.

In order to ensure that you are notified, the form must be filled out and sent to the agency listed on the page, as soon as possible. Also, if you choose to request post-conviction notification, you must contact the agency you requested notification from if there is ever a change in your address or telephone number.

NOTE: It is your responsibility as a victim or lawful representative to keep your address and telephone information current. Failure to keep this information current will constitute a waiver of your right to be notified in the future.

If you have any questions regarding the type of notice you receive, please contact the agency that sent you the notice.

**SI USTED NECESITA AYUDA EN ESPAÑOL, POR FAVOR COMUNIQUESE
AL NUMERO (520) 285-5627**

POST-CONVICTION NOTIFICATION REQUEST

SECTION A

Defendant Name: State v. _____
Case No. _____
Charge(s) _____
Court: Nogales City Court
County: Santa Cruz
Sentencing Date: _____
Judge: _____ (Judge that signed sentencing order)
Date Sent to Victim: _____
Sent by: _____, Nogales City Attorney's Office

SECTION B

TO BE COMPLETED BY VICTIM OR LAWFUL REPRESENTATIVE

* * * **CONFIDENTIAL INFORMATION** * * *

Only one person may receive notification. Check only one that applies:

☐ I am requesting notification be sent to me, the victim.

☐ I am designating: _____
First Name M.I. Last Name

to be my lawful representative and request all notices be sent only to this lawful representative.

Street Address: _____ Apt#: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ - _____ Work Phone: (____) _____ - _____

Signature: _____ Date: _____

Representative's Relationship to Victim: _____

RETURN THIS FORM TO: Nogales City Attorney's Office
777 N. Grand Avenue
Nogales, AZ 85621